

AO 435 (Rev. 04/11)		Administrative Office of the United States Courts		<b>FOR COURT USE ONLY</b>	
<b>TRANSCRIPT ORDER</b>				<b>DUE DATE:</b>	
<i>Please Read Instructions:</i>					
1. NAME <b>Attorney Gordon Copland</b>		2. PHONE NUMBER <b>(304) 933-8181</b>		3. DATE <b>2/19/2014</b>	
4. MAILING ADDRESS <b>Stephoe&amp;Johnson, 400 White Oaks Boulevard</b>		5. CITY <b>Bridgeport</b>		6. STATE <b>WV</b>	7. ZIP CODE <b>26330</b>
8. CASE NUMBER <b>1:09cv87</b>	9. JUDGE <b>Irene M. Keeley</b>	DATES OF PROCEEDINGS			
		10. FROM <b>7/19/2013</b>		11. TO <b>7/19/2013</b>	
12. CASE NAME <b>Dey v Teva</b>		LOCATION OF PROCEEDINGS			
		13. CITY <b>Clarksburg</b>		14. STATE <b>WV</b>	
15. ORDER FOR					
<input type="checkbox"/> APPEAL		<input type="checkbox"/> CRIMINAL		<input type="checkbox"/> CRIMINAL JUSTICE ACT	
<input checked="" type="checkbox"/> NON-APPEAL		<input checked="" type="checkbox"/> CIVIL		<input type="checkbox"/> BANKRUPTCY	
		<input type="checkbox"/> IN FORMA PAUPERIS		<input type="checkbox"/> OTHER	
16. TRANSCRIPT REQUESTED (Specify portion(s) and date(s) of proceeding(s) for which transcript is requested)					
PORTIONS		DATE(S)		PORTION(S)	
<input type="checkbox"/> VOIR DIRE				<input type="checkbox"/> TESTIMONY (Specify Witness)	
<input type="checkbox"/> OPENING STATEMENT (Plaintiff)					
<input type="checkbox"/> OPENING STATEMENT (Defendant)					
<input type="checkbox"/> CLOSING ARGUMENT (Plaintiff)				<input type="checkbox"/> PRE-TRIAL PROCEEDING (Specy)	
<input type="checkbox"/> CLOSING ARGUMENT (Defendant)					
<input type="checkbox"/> OPINION OF COURT					
<input type="checkbox"/> JURY INSTRUCTIONS				<input checked="" type="checkbox"/> OTHER (Specify)	
<input type="checkbox"/> SENTENCING				<b>Final Pretrial Conference</b>	
<input type="checkbox"/> BAIL HEARING				<b>July 19, 2013</b>	
17. ORDER					
CATEGORY	ORIGINAL (Includes Certified Copy to Clerk for Records of the Court)	FIRST COPY	ADDITIONAL COPIES	NO. OF PAGES ESTIMATE	COSTS
ORDINARY	<input checked="" type="checkbox"/>	<input type="checkbox"/>	NO. OF COPIES	<b>75.00</b>	<b>273.75</b>
14-Day	<input type="checkbox"/>	<input type="checkbox"/>	NO. OF COPIES		
EXPEDITED	<input type="checkbox"/>	<input type="checkbox"/>	NO. OF COPIES		
DAILY	<input type="checkbox"/>	<input type="checkbox"/>	NO. OF COPIES		
HOURLY	<input type="checkbox"/>	<input type="checkbox"/>	NO. OF COPIES		
REALTIME	<input type="checkbox"/>	<input type="checkbox"/>			
CERTIFICATION (18. & 19.) By signing below, I certify that I will pay all charges (deposit plus additional).				ESTIMATE TOTAL	<b>273.75</b>
18. SIGNATURE <b>/s/ Gordon Copland</b>				PROCESSED BY	
19. DATE <b>2/19/2014</b>				PHONE NUMBER <b>(304) 282-0395</b>	
TRANSCRIPT TO BE PREPARED BY  <b>Linda Bachman P.O. Box 969, Clarksburg, WV 26302</b>				COURT ADDRESS	
ORDER RECEIVED	DATE <b>2/19/2014</b>	BY <b>LB</b>			
DEPOSIT PAID			DEPOSIT PAID	<b>0.00</b>	
TRANSCRIPT ORDERED	<b>2/19/2014</b>		TOTAL CHARGES	<b>273.75</b>	
TRANSCRIPT RECEIVED			LESS DEPOSIT		
ORDERING PARTY NOTIFIED TO PICK UP TRANSCRIPT			TOTAL REFUNDED		
PARTY RECEIVED TRANSCRIPT	<b>2/28/2014</b>		TOTAL DUE	<b>273.75</b>	